

II
BOROUGH OF MARLBOROUGH

ANNUAL REPORT
OF THE
MEDICAL OFFICER
OF HEALTH
&
CHIEF PUBLIC HEALTH
INSPECTOR

—————
FOR THE YEAR
—— 1971 ——

MEMBERS OF THE PUBLIC HEALTH COMMITTEE
(as at December, 1971)

Chairman: Councillor Mrs. I.L. Pocock
Vice-Chairman: Councillor A.G. Beauchamp
Councillor Major H.P.B. Hodgson
Councillor A.G. Parks
Councillor S.R. Dobson

Public Health Department of the Authority

Medical Officer of Health

F.D.F. Stoodo, M.B., B.Ch., M.F.C.M., D.P.H.

Chief Public Health Inspector

H.C. Yeoman, F.I.P.H.E., M.INST.H.E., M.R.S.H.

Additional Public Health Inspector

M.J. Woodward, M.A.P.H.I.

Clerk (M.O.H. Office)

Miss G.M. Boswell

Clerk (P.H. Office)

Mrs. V.A. Cousins

Public Health Department, Council Offices,
1, The Green, Marlborough.

Telephone Numbers:	Medical Officer of Health	Marlborough 2487
	Public Health Department	Marlborough 2474

The Medical Officer of Health acts in a similar capacity for the Rural Districts of Amesbury, Marlborough & Ramsbury, and Powsy. These combined districts have a population of 68,020 and an area of 23,289 acres. They have appointed a Joint Committee, The East Wilts United Districts (Medical Officer of Health) Committee, to deal with all matters relating to the office of Medical Officer of Health. The Medical Officer of Health also performs duties for the Wiltshire County Council under the National Health Service and Education Act.

BOROUGH OF MARLBOROUGH

ANNUAL REPORT
of the
MEDICAL OFFICER OF HEALTH
for the Year 1971

Council Offices,
1, The Green,
Marlborough.

To The Mayor, Aldermen and Councillors:


Mr. Mayor, Ladies and Gentlemen,

I have the honour to present my annual report for the year 1971. This report in view of reorganisation of Local Government is likely to be my penultimate one, and is compiled on similar lines as last year. I am grateful to Mr. Yeoman, the Chief Public Health Inspector for his report which is included. I am also indebted to Dr. Lycett, the County Medical Officer for supplying details of immunisation procedures carried out during the year, and to Mr. Hampshire, the Water Engineer, Borough of Swindon for supplying me with a summary of bacterial and chemical analysis.

Marlborough is situated on the river Kennet at an elevation approximately 470 feet above sea level, and although a small Borough, has an importance which is not related to its size.

Primarily a shopping centre, the town is also an important educational centre, as in addition to Marlborough College, there is the Grammar School dating from 1550, and also a Secondary Modern School, both now in new modern buildings in excellent surroundings. The livelihood of the population is provided in the main by work in local trades and services, a little light industry, agricultural pursuits, and further afield the industrial town of Swindon. There is a flourishing catering industry to meet the needs of the many visitors to the town, which provides employment, much of it on a part-time and seasonal basis.

The town is very fortunate in having the Savernake hospital within two miles of the centre in pleasant surroundings. This hospital of 70 beds provides in-patient facilities for at least 90 per cent of those who require hospital admission, has a first class maternity unit, and a modern well equipped out-patients department. Arrangements for the provision of a geriatric unit referred to in last years report are due to come into operation almost immediately, with fifteen beds, ten for women and five for men. Plans for a Day hospital too are, I understand, in the pipe line. This is an important development since we frequently experience problems with old people who do not require full residential care, particularly those living with relatives, for whom this would be a most welcome provision.



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The general health of the town is satisfactory, although undoubtedly inflation has adversely effected the standard of living of those on small fixed incomes and families where the bread winner is in a low income bracket. The population estimate has shown no change in spite of the fact that the number of occupied houses has increased by 53, and the natural increase, excess of births over deaths, is 41. The opening of the M4 motorway seems to have had some effect in reducing the volume of traffic passing through the town, but the increased size of the modern lorry has largely offset any benefit this has brought, while it is too early to estimate what effect it will have on future population trends.

The number of births has risen slightly, which has resulted in a lower percentage figure for illegitimate births, although the number of these, ten, is the same. Although family planning has a part to play in this situation one feels that this is not the real answer at a time when promiscuity has lead to a situation in which venereal disease, particularly gonorrhoea, is virtually out of control. Family planning, a centre for which was established some years ago in the town in the County Clinic, as a result of voluntary effort, has certainly however a large part to play in the overall control of population, vital if the quality of life is to be maintained at anything like its present level.

The pattern of deaths has shown little change, the total being five more than last year, at 68. Of the ten deaths from malignant disease, lung cancer accounted for only two, but there were sixteen from coronary heart disease, an increase of six, and one each from pneumonia and chronic bronchitis. The causes of all these deaths are closely related to cigarette smoking, underlined in the report of the Royal College of Physicians, published during the year. Their estimate that in 1968 of the 99,082 deaths which occurred among men aged 33-64 there were 31,000 premature deaths associated with cigarette smoking, is worth repeating together with their firm findings that there is a steady and comparatively rapid decline in the risks to the individual who gives up smoking and remains a non-smoker. I believe that information of this type should be widely ventilated so that smokers are in a position to make up their minds on their attitude to the smoking habit based on accurate evidence. However, since the burden, both physical and financial on the N.H.S. is a heavy one, and recent work published by an M.O.H. Dr. Taylor, seems to indicate that in school children whose parents are smokers there is a significantly increased liability to respiratory disease, every effort should be made to try to influence smokers to abandon the cigarette, and even more important to influence the young to abstain. I believe that everything should be done where possible to discourage smoking in public places, and I was particularly pleased that the Council agreed to provide permanent notices either "Smoking Discouraged" or "No Smoking Please" for distribution to owners and managers of establishments and other places to which the public have access, and that as a result a great many establishments in the town are displaying these notices.

The number of cases of infectious disease notified was the lowest since 1962, but of the five that were notified, two were due to respiratory tuberculosis - a reminder that this disease is still with us. The other three due to measles, are now preventable by vaccination. This present happy position in respect of notifiable diseases is entirely due to our successful vaccination policy, wholeheartedly accepted by the parents in this town for their children, and ably implemented by the County Health Department. This has exceeded our greatest expectations of the early post war years when I first entered the Public Health Service. Although modifications to the vaccination policy such as the abandonment of routine infant smallpox vaccination, may be made from time to time, in general it will be necessary to continue the policy of

universal vaccination indefinitely, which will require at least as much attention in the future as the County Health Department has given to it in the past.

Although the length of the housing list for council house accommodation shows little evidence of any decline - at present there are 110 on the list for general housing accommodation, and 72 for old persons accommodation - housing conditions are reasonably good, and the points scheme in respect of housing applicants for council accommodation has worked very well. I have however suggested minor alterations to the scheme to give greater priority to families with young children occupying older properties, usually flats situated above or behind business premises in the centre of the town, which although possessing in most instances all the five amenities, are by their "bad arrangement" often a poor environment for optimum child development. One is reluctant to deal with such premises under Housing Act procedure, since in most cases they provide useful residential accommodation for adults, at least up to middle age, in light of the current housing shortage. The extension to York Place warden controlled grouped accommodation was completed, providing another 16 flatlets, and plans have been put in hand to provide for 21 flatlets at the Priory in the centre of the town, with a warden and full community facilities. The Council decided however not to provide full grouped accommodation facilities at the flats to be built at Port Fields, mainly on the grounds that this site was not particularly suitable, as I understand it, for old people, and that there was a need for flatlets for the middle aged in this area. I feel however that it is difficult to overbuild in respect of grouped accommodation with full community facilities, and to satisfy the need it may well be necessary to build flatlets in situations where due to circumstances the site may not be entirely ideal. Like many authorities we are now facing problems with regard to tenants in grouped accommodation who have become too frail to support themselves adequately, even in these sheltered conditions. This is something which needs to be considered in co-operation with other interested authorities. In the future as is being done in some private schemes, "sick bays" should perhaps be provided in association with grouped accommodation, where tenants can be nursed during temporary illness or when awaiting admission to a geriatric hospital.

The Luncheon Club for old people continues to flourish and at present there are plans to provide accommodation for it in the Priory in the future. However, some day I hope that it will be possible to find suitable accommodation to provide for a Day Club on the lines of that now established at Devizes. Meals on Wheels has carried on its unobtrusive good work during the period. Our greatest thanks are due to all those who give their time freely and contribute so much to the success to both.

The water supply is now the responsibility of the Swindon Water Department, and has given no cause for anxiety.

I am very grateful to the members of the Council for their continued support and for the kindness and co-operation of all the Officers of the Council. This has been yet another difficult year for local authority staff, particularly for those working in Public Health Departments for whom the future is even less secure. There seems to be little insight by some with regard to the work which goes on, and is required to maintain our present high standards in environmental health. As I have said in my previous reports, it is crucial that the present relationship between the Medical Officer and the Public Health Inspectorate is maintained when the Medical Officer of Health disappears, and is replaced by a Medical Adviser who is expected to come from

the staff of the N.H.S. I regret that the appointments of Medical Advisers and also that of Chief Public Health Inspectors are not to be statutorily designated officers at a time when it seems likely that appointments to be made by the new Counties in the fields of commerce and even in the supervision of gambling are likely to be so. This would seem to indicate, to me at any rate, a rather curious attitude of mind with regard to the importance of public health. There will of course also be no security of tenure of office for the Medical Adviser or for the future Chief Environmental Health Officer, presumably a Chief Public Health Inspector; at a time when it seems as important as it ever was for a Medical Adviser to be able to make his own unbiased comments on any matter which affects the health of those living in the area for whom he is responsible in this regard without fear of the consequences.

Finally I should specifically like to thank Mr. Yeoman and his staff, Dr. Lishman for acting as my Deputy, Dr. Wornald and the staff of the Public Health Laboratory for their continued help and frequent valued advice, and my secretary, Miss Boswell for her help and co-operation, particularly for her work in preparing this annual report.

I have the honour to be,

Your obedient servant,

F. D. F. STEEDE,

Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH

Area of the Borough in acres	1,496
Population, Registrar General's estimated mid-year	6,120
Number of inhabited houses and flats	1,849
Rateable value as at 1.4.71	£239,473
Value of penny rate as at 1.4.71	£916

<u>Vital statistics</u>	<u>M.</u>	<u>FT.</u>	<u>Total</u>
Live Births - Legitimate	54	45	99
Illegitimate	4	6	10
Totals	58	51	109
Live birth rate per 1,000 population			17.8
Illegitimate live births per cent of total births			9.0
Stillbirths - Legitimate	0	0	0
Illegitimate	0	0	0
Totals	0	0	0
Stillbirth rate per 1,000 total live and stillbirths			0.0
Deaths	34	34	68
Death rate per 1,000 population			11.1
Infant deaths under one year - Legitimate	1	0	1
Illegitimate	0	0	0
Totals	1	0	1
Infant mortality rate per 1,000 live births			9.0
Legitimate infant deaths per 1,000 legitimate live births ..			10.0
Illegitimate infant deaths per 1,000 illegitimate live births			0.0
Neonatal deaths (under four weeks) - Legitimate	1	0	1
Illegitimate	0	0	0
Totals	1	0	1
Neonatal mortality rate per 1,000 total live births			9.0
Early neonatal deaths (under one week) - Legitimate	1	0	1
Illegitimate ...	0	0	0
Totals	1	0	1
Early neonatal mortality rate per 1,000 live births			9.0
Perinatal mortality rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths)			9.0

Year	1967	1968	1969	1970	1971
Infant deaths	2	3	2	1	1
Infant mortality rates	25.0	45.0	24.0	13.0	9.0

CAUSES OF DEATHS, 1971

Cause of Death		M.	F.	Total
B19(3)	Malignant neoplasm, stomach	1	-	1
B19(4)	Malignant neoplasm, intestine	-	3	3
B19(6)	Malignant neoplasm, lung, bronchus	2	-	2
B19(7)	Malignant neoplasm, breast	-	2	2
B19(8)	Malignant neoplasm, uterus	-	1	1
B19(11)	Other malignant neoplasms	1	2	3
B46(5)	Other diseases of nervous system	-	1	1
B26	Chronic rheumatic heart disease	1	2	3
B28	Ischaemic heart disease	13	3	16
B29	Other forms of heart disease	4	3	7
B30	Coronary disease	7	9	16
B46(6)	Other diseases of circulatory system	1	-	1
B32	Pneumonia	-	1	1
B33(1)	Bronchitis and emphysema	1	-	1
B46(9)	Other diseases, genito-urinary system	-	1	1
B42	Congenital anomalies	-	1	1
B44	Other causes of perinatal mortality	1	-	1
B45	Symptoms and ill defined conditions	1	4	5
BE48	All other accidents	-	1	1
BE49	Suicide and self-inflicted injuries	1	-	1
Total all causes		34	34	68

Comparison with England and Wales

	per 1,000 population		per 1,000 Live Births	per 1,000 Total Births
	Live Births (adjusted)	Death Rate (adjusted)	Infant Mortality	Stillbirths
Marlborough Borough	23.3	11.2	9.0	0.0
England and Wales	16.0	11.6	18.0	12.0

NATIONAL ASSISTANCE ACTS, 1948 SECTION 47 and 1951

No action was taken under this legislation.

IMMUNISATION STATISTICS 1971

Diphtheria, Whooping cough, Tetanus, Measles and Poliomyelitis Immunisations

Year of Birth		1971	1970	1969	1968	1967	1962-66	1956-61	Others under 16
Primary immunisations completed during 1971	Diph.	40	39	3	1	1	2	-	-
	Wh.cough	40	35	3	-	-	-	-	-
	Tetanus	41	39	3	1	1	1	1	-
	Measles	-	49	15	3	8	3	-	-
	Polio.	40	39	3	1	1	2	-	-
Reinforcing immunisations given in 1971	Diph.	-	26	43	2	28	11	1	-
	Wh.cough	-	24	41	1	1	3	-	-
	Tetanus	-	26	43	3	29	13	8	-
	Polio.	-	24	41	2	26	11	2	-

Smallpox Vaccinations
(Vaccination discontinued as a routine measure in early childhood September 1971)

	Months				Years		
Age Group	0-3	3-6	6-9	9-12	1	2-4	5-15
Vaccination	-	-	-	-	4	19	2
Re-vaccination	-	-	-	-	-	-	-

WATER SUPPLY, 1971

Chemical and Mineral Examination Analysis of Final Water
(parts per million)

Source	Date of Sample	Chlorides	Non Carbonate		Total Hardness	Nitrate Nitrogen	Nitrite Nitrogen	Ammoniacal Nitrogen	Albuminoid Nitrogen	Oxygen Absorbed	Natural Fluoride
			Hardness	Hardness							
Clatford "	12 Jan.	10	25	25	250	4.1	absent	0.00	0.00	0.00	0.10
	12 July	9	35	35	250	4.6	absent	0.00	0.00	0.10	0.12
Marlborough "	12 Jan.	9	20	20	245	3.0	absent	0.00	0.00	0.00	0.10
	12 July	8	15	15	245	3.3	absent	0.00	0.00	0.20	0.10

Bacterial Analysis

Source	Water	Total Samples Taken	Samples in which Coliforms were absent in 100 ml.		E.Coli Type 1 were absent in 100 ml.	
			No.	%	No.	%
Clatford	raw	48	47	98	50	100
	final	51	51	100	51	100
Marlborough	raw	-	-	-	-	-
	final	50	50	100	50	100

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1971

Disease	Analysis of Total Cases in Age Group										Admitted to Hospital	Total Deaths	Under 1 Year	Total Cases
	1 -	2 -	3 -	4 -	5 - 9	10-14	15-24	25-34	35-44	45-64	65 +			
Acute encephalitis														1
Acute meningitis														1
Acute poliomyelitis														
Anthrax														
Cholera														
Diphtheria														
Dysentery														
Infective jaundice														
Leprosy														
Leptospirosis														
Malaria	1		1		1									3
Measles	1													1
Ophthalmia neonatorum														1
Paratyphoid fever														1
Plague														1
Relapsing fever														1
Scarlet fever														1
Smallpox														1
Tetanus														2
Tuberculosis, respiratory ..									2					2
Tuberculosis, other														1
Typhoid fever														1
Typhus														1
Whooping cough														1
Yellow fever														1
Totals	1	1	1		1	1	1	1	2			1		5

MARLBOROUGH BOROUGH COUNCIL

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR FOR THE YEAR 1971

Telephone: Marlborough 2474

Council Offices,
1, The Green,
Marlborough.

To the Mayor, Aldermen and Councillors.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present my twenty third Annual Report on the work of the Public Health Department. The report covers the year ending 31st December, 1971 and is prepared in accordance with the Department of Health's circular dated 3rd January, 1972.

Yours faithfully,

H. C. YEOMAN.
CHIEF PUBLIC HEALTH INSPECTOR.

January, 1972.

INSPECTION OF FOOD AND FOOD PREMISES

Food and Drugs Acts

The following premises are registered under section 16 of the Food & Drugs Act, 1955.

Sale of Ice Cream	27
Manufacture of Ice Cream	1
Manufacture and sale of sausages	4
Fish and Chips	1

Food Premises

There are the following food premises within the Borough:-

Bakehouses	3
Butchers	4
Cafes and Restaurants (unlicensed)	6
Dairies	1
Delicatessens	1
Fishmongers	1
Fried Fish Shops	1
Greengrocers	3
Grocers and General Stores	10
Licensed premises serving meals	11
Licensed premises not serving meals	11
Sweets and sugar confectionery	6
School Kitchens	6
Factory Canteens	6

Condemned Food

The following foods were surrendered to the Public Health Department during the year:-

Fish	26 lbs.
Meat	46 lbs.
Miscellaneous	186 lbs.
	<u>258 lbs.</u>

Meat Inspection

There are no slaughter houses in the district and the only meat inspected was in retail shops or market stalls.

Food Hygiene General
Regulations, 1960.

234 routine inspections were carried out during the year and apart from a small number of informal notices no action was required. The standard generally is commendably high.

Milk Supplies - Brucella
Abortus.

No 'raw' milk is sold in the Borough and therefore no samples were taken.

Poultry Inspection.

There are no poultry processing plants within the Borough.

Milk (Special Designation)
Regulations 1963.

There are 8 licensed dealers in the district viz:

J. M. & H. Paulsen, Merlin Restaurant.	Pasteurised
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Church Farm Dairy (Marlborough) Ltd.	Pasteurised Sterilised U.H.T.
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Mace Marketing	Pasteurised Sterilised U.H.T.
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L. S. Wade, 77 High Street	Pasteurised Sterilised U.H.T.
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Swindon and District Co-operative	Pasteurised Sterilised U.H.T.
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International Stores High Street	U.H.T. Sterilised Pasteurised
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Stratton Sons & Mead	Pasteurised
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A. J. Baden, 18, St. Martins	Pasteurised
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All premises are regularly inspected and a total of 41 visits made. 44 samples were taken, all but 2 met the required standards.

FACTORIES

12 inspections were carried out during the year and details are set out in the appendix to the report.

WATER SUPPLY

The water undertaking for the district is Swindon Corporation. 2 bacteriological samples were taken during the year, both of which were satisfactory.

OFFICES, SHOPS & RAILWAY PREMISES ACT, 1963

Little progress was made in the detailed inspection of registered premises but routine complaints were investigated.

MOVEABLE DWELLINGS

There is only 1 licensed site within the Borough. The 2 caravans are well maintained.

RODENT CONTROL

66 complaints of rodent infestation were received during the year, 28 of which came from business premises. In addition a test baiting of 25 manholes on the main sewerage system was carried out and 4 manholes were found to be infested. The infestation was cleared after several re-visits. The work of rodent control is carried out by a member of the outside staff under the direct supervision of the Public Health Inspector.

SWIMMING BATH

The open-air heated swimming bath continued to be well used, and there were no problems with heating, filtration or chlorination. Tintometer readings are taken 3 times a day and 3 bacteriological samples taken during the year. The bath was open from 11th April to 26th September.

PETROLEUM REGULATIONS

There are 20 licensed installations within the district, all of which have been inspected at least once.

SEWERAGE

The optimism concerning the new sewerage scheme expressed in the previous report was not fully justified, and at the end of 1971 the scheme had still not been commenced. Tenders have been invited for the second time and it is hoped that a start will be made in the Spring. Negotiations are taking place for the acceptance of sewage from 3 neighbouring parishes in the Marlborough and Ramsbury Rural District.

The Works, in the meantime, continue to work reasonably satisfactorily, although some samples fail to meet the Thames Conservancy Standard.

PUBLIC CLEANSING

All parts of the district have a weekly collection and in addition cafes, restaurants and school canteens have a second collection. Disposal at Portfields continues to be satisfactory and discussions are now taking place over the extension of the site, or possibly the shared use of the Rural District's existing tip.

HOUSING

Council Houses. Phase I of the Portfields development was completed during the year, comprising 9-3 bedroom houses, 9-2 bedroom houses, 3-2 bedroom flats and 3-1 bedroom flats. The second stage of York Place (grouped Old Persons flats) was nearing completion. This comprises 10-1 bedroom flats, 6 bed/sitters and will provide a total number of units in the entire scheme of 31 units and a Warden's flat. The 3 houses in Tinpit were completed, and a start made on 2 flats and a shop at 3, Kingsbury Street.

Private Houses. 36 houses were completed during the year to give a total completed since the war of 446. At the end of December a further 59 were under construction.

Improvements to Pre-war Council Houses. The modernisation programme has continued satisfactorily and 109 houses are now complete. A further 50 had been commenced by the end of the year.

Improvement Grants. 13 Discretionary Grants, value £17,204 were made during the year. There were no applications for Standard Grants.

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred		
			To H.M. Inspector (4)	By H.M. Inspector (5)	
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary Conveniences (a) Insufficient (S.7)	-	-	-	-	-
(b) Unsuitable of defective	-	-	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to Out-Work _____)	-	-	-	-	-
Total	-	-	-	-	-

PART VIII OF THE ACT (Sections 133 and 134)
reference Outworkers -

1. (Glove-making)

